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CONFIRMATION NO. 1023

<b>SERIAL NUMBER</b> 10/729,153	<b>FILING OR 371(c) DATE</b> 12/05/2003 <b>RULE</b>	<b>CLASS</b> 398	<b>GROUP ART UNIT</b> 2613	<b>ATTORNEY DOCKET NO.</b> 7-10-2
<b>APPLICANTS</b> Aref Chowdhury, Springfield, NJ; Rene'-Jean Essiambre, Red Bank, NJ; Lisa Kathleen Wickham, Ithaca, NY; <i>yes ESB</i>				
<b>** CONTINUING DATA *****</b> This application is a CIP of 10/442,287 05/20/2003				
<b>** FOREIGN APPLICATIONS *****</b> <i>None</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 03/08/2004</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance <i>AM</i> Verified and Acknowledged <u>                    </u> Examiner's Signature <u>                    </u> Initials		<b>STATE OR COUNTRY</b> NJ	<b>SHEETS DRAWING</b> 9	<b>TOTAL CLAIMS</b> 20
<b>INDEPENDENT CLAIMS</b> 3				
<b>ADDRESS</b> Docket Administrator (Room 3J-219) Lucent Technologies Inc. 101 Crawfords Corner Road Holmdel, NJ07733-3030				
<b>TITLE</b> Low total excursion dispersion maps				
<b>FILING FEE RECEIVED</b> 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	